Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART							SMALL EI	YTITY		OTHER	- A - A - A - A - A - A - A - A - A - A
<b>-</b> -	TAL 01 1117		(Column 1)		(Colur	mn 2)	TYPE		OR	SMALL	1 F 9
TOTAL CLAIMS			4				RATE	FEE			FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	Ų minus 20=		*\$		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		. 0		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	TOTAL		OR		The state of the s
CLAIMS AS AMENDED - PART II									_	OTHER	
		(Column 1)		(Colur	mn 2)	(Column 3)	SMALL	ENTITY	ÖR	SMALL E	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	\$.64 () \$.74 ()
AME	Independent	*	Minus	***		=	X40=		OR	X80=	1. 数
Ù	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=	4 100
									┨┈╏	TOTAL	
		(Column 3)	ADDIT. FEE		<b>.</b>	ADDIT. FEE					
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	mn 2) HEST MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	*	Minus	**		=	X\$ 9=	-	OR	X\$18=	
MEN	Independent	*	Minus	***		=	X40=		OR	V00	
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+	1		,
_		_					+135=		OR		,
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
_		(Column 1)			ımn 2)	(Column 3)					
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	HEST MBER IOUSLY ) FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIGNAL FEE
N M	Total	*	Minus	**		· =	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		<u> </u> =	X40=		OR	\ <u>\</u>	<u> </u>
L	FIRST PRESE	ENTATION OF M	ULTIPLE DEPENDENT		T CLAIM			<del>                                     </del>	1		
	If the entry in	umn 1 is less than th	he entry in set	ımn 🤉	e "O" in a	lumn 3	+135=		OR		
**	If the "Highest Nu "If the "Highest Nu	umber Previously Pa umber Previously P	Paid For" IN THI Paid For" IN TH	IIS SPACE I	is less tha	an 20, enter "20." an 3, enter "3."	7,0011.122	L	OR	TOTAL ADDIT. FEE	
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

<u> </u> _	Effective October 1, 2001											
CLAIMS AS FILED - PART I							SMALL ENTITY				OTHER	R THAN
TOTAL CLAIMS			(Column 1)		(Cole	(Column 2)		TYPE		OR 7	SMALL ENTITY	
11-							ATE	FEE	-	RATE	FEE	
F	OR	NUMBER	NUMBER FILED		NUMBER EXTRA		C FEE	370.00	OR	BASIC FEE	740.00	
T	OTAL CHARGE	เ - เกเกนร 20=		* *		XS	9=		JOR	X\$18=		
ΙΙ—	IDEPENDENT C	- minus 3 =		-		X	12=		OR	X84=		
М	ULTIPLE DEPE	RESENT				+1-	40=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TO	TAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II						CM		T 1 17171	-	OTHER	
_	Kennenga sa	(Column 1) CLAIMS		(Colur		(Column 3)	SM.	ALL	ENTITY	OR 7 (	SMALL	
AMENDMENT.A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	· H	Minus	** 2	0	=	X\$	9=		OR	X\$18=	
AME	Independent	· 2	Minus	*** /	2	=	X4:	2=		OR	X84=	
L	FIRST PHESE	ENTATIÓN OF MU	JUTIPLE DEI	PENDENT	CLAIM		+14	0=		OR	+280=	•
								)TAL		OR	TOTAL ADDIT: FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)	ADDIT.	ree .		i /	ADDII. FELL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total	*	Minus	##		=	X\$ :	9=		OR	X\$18=	٠٠, 
	Independent	*	Minus	***	~: 414.4	=	X42	?=		OR	X84=	
	FIRST PHESE	NTATION OF MU	LIPLE DEF	'ENDEN I	CLAIM		+140	D=		OR	+280=	
							TC ADDIT.	TAL FEE		OR ,	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colum	าก 2)	(Column 3)		•		-		
Z L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42	=		OR	X84=	
٩	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		+140	-		- 1	+280=	
* I	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> </ul>									OR L	TOTAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												